

# CLAIMS ONLY

SERIAL NO.

FILING DATE

APPLICANT(S)

## CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			*		*		*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
1	/						51		/				
2							52	/					
3							53		/				
4							54			/			
5							55				/		
6							56					/	
7							57						/
8							58						/
9							59						/
10							60						
11	/						61						
12							62						
13							63						
14							64						
15							65						
16							66						
17							67						
18							68						
19							69						
20	/						70						
21	/						71						
22							72						
23							73						
24	/						74						
25							75						
26							76						
27	/						77						
28							78						
29							79						
30							80						
31							81						
32							82						
33	/						83						
34							84						
35							85						
36							86						
37							87						
38							88						
39							89						
40							90						
41							91						
42							92						
43							93						
44	/						94						
45							95						
46							96						
47							97						
48							98						
49							99						
50							100						
TOTAL IND.		↓		↓		↓	TOTAL IND.	8	↓		↓		↓
TOTAL DEP.		←		←		←	TOTAL DEP.	51	←		←		←
TOTAL CLAIMS							TOTAL CLAIMS	59					

\* MAY BE USED FOR ADDITIONAL CLAIMS OR ADMDMENTS